

GENERAL FACT SHEET

10R-190

BILL NUMBER

BRIEF TITLE

APPROVAL DEADLINE

REASON

Approval of MOU's with AmeriCorp member

host agencies and organizations

DETAILS

POSITIONS/RECOMMENDATIONS

<p>The proposed resolution authorizes approval of MOU's for 12 AmeriCorp host sites for service of more than one year. These are host sites for Recovery-Go Green initiative members. This initiative is a program funded through a grant from the Federal AmeriCorps Program. Acceptance of the grant funding was approved by EO #82566.</p>	Sponsor	Parks & Recreation
	Program Departments, or Groups Affected	All automated departments Parks & Recreation
	Applicants/Proponents	Applicant City Department Parks & Recreation Other
<p>Discussion (Including Relationship to other Council Actions)</p> <p>The AmeriCorps Program administered by the Parks & Recreation Department is supported by Federal grant funding. AmeriCorps members serve a term of service with the Parks & Recreation Department, other City Departments, and with partnering community agencies and organizations.</p>	Opponents	Groups or Individuals Basis of Opposition
	Staff Recommendations	<input checked="" type="checkbox"/> For <input type="checkbox"/> Against Reason Against
	Board or Commission Recommendation	BY <input type="checkbox"/> For <input type="checkbox"/> Against <input checked="" type="checkbox"/> No Action Taken <input type="checkbox"/> For with revisions or conditions (See Details column for conditions)
	CITY COUNCIL ACTIONS (For Council Use Only)	<input type="checkbox"/> Pass <input type="checkbox"/> Pass (As Amended) <input type="checkbox"/> Council Sub. <input type="checkbox"/> Without Recommendation <input type="checkbox"/> Hold <input type="checkbox"/> Do not Pass

POLICY/PROGRAM IMPACT

	POLICY OR PROGRAM CHANGE	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES _____ _____
	OPERATIONAL IMPACT ASSESSMENT	_____ _____ _____
	FINANCES	
	COST AND REVENUE PROJECTIONS	COST of total project: \$ 0 COST of this Ordinance/ Resolution \$ 0 RELATED annual operating Costs \$ 0 INCREASE REVENUE EXPECTED/YEAR \$
	SOURCE OF FUNDS	CITY [Approximately] \$ _____ % \$ _____ % \$ _____ % NON CITY [Approximately] \$ _____ % \$ _____ % \$ _____ %
	BENEFIT COST <input type="checkbox"/> Front Foot Average Assessment <input type="checkbox"/> Square Foot \$ _____ \$ _____	

FACT SHEET PREPARED BY: Lynn Johnson

REVIEW BY:

REFERENCE NUMBER